L12000119238

| (Req | questor's Name) | |
|---------------------------|-------------------|-----------|
| (Add | iress) | |
| (Add | dress) | |
| (City | //State/Zip/Phone | #) |
| PICK-UP | WAIT | MAIL |
| (Bus | siness Entity Nam | e) |
| (Doc | cument Number) | |
| Certified Copies | Certificates | of Status |
| Special Instructions to F | Filing Officer: | |
| | | |
| | | |
| | JAN 2 5 2013 | |
| | A. LUNT | |

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COVER LETTER

| Division of Cor | porations | | |
|----------------------------|---|--|---|
| SUBJECT: First | Pitch Marketing I Name of Limit | Advertsing, LLC ed Liability Company | · |
| The enclosed Articles of | Amendment and fee(s) are sub- | mitted for filing. | |
| Please return all correspo | ondence concerning this matter | to the following: | |
| | Da | Name of Person | · |
| | | Firm/Company | |
| | 3000 | Portofino Cir | de #103 |
| | Paln | Porto Ino Cir Address n Beach burdens City/State and Zip Code De marketran. To be used for future annual report notificat | FI 30 STATE OF STATE |
| | E-mail address: (to | d @ marketran. o be used for future annual report notificat | ORN 22 P |
| For further information of | concerning this matter, please ca | all: | |
| Dew Name of | id Wenger of Person | at (561) 384-8 Area Code & Daytime To | 035 |
| Enclosed is a check for t | he following amount: | | |
| ■ \$25.00 Filing Fee | □\$30.00 Filing Fee & Certificate of Status | □\$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | □\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |

MAILING ADDRESS:

TO:

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| (Name of the Limited Liabil (A Florid | Marketing Adveity Company as it now appears on a lability Company) | | |
|--|--|--------------------------------------|-----------------|
| The Articles of Organization for this Limited Liability | Company were filed on09 18 | 2012 | _ and assigned |
| Florida document number <u>L12000119238</u> | · | | • |
| This amendment is submitted to amend the following: | | | |
| A. If amending name, enter the new name of the li | mited liability company here: | | |
| Marketran, LLC | | | |
| The new name must be distinguishable and end with the v "L.L.C." | words "Limited Liability Company," tl | he designation "LLC | 7.0 |
| Enter new principal offices address, if applicable: | | ر مراد در از استان در از استان | |
| (Principal office address MUST BE A STREET AD) | DRESS) | (2) (3) | 22 |
| 12 Thicipus Vijitee uuuressi Messa 222, 13 11221 1122 | | mag | |
| | <u> </u> | | w L |
| Enter new mailing address, if applicable: | | 7 | 7 |
| (Mailing address MAY BE A POST OFFICE BOX) | | | |
| Interning www.coolings. But it and a little both | | | |
| B. If amending the registered agent and/or regregistered agent and/or the new registered office as | | ecords, enter the | name of the new |
| Name of New Registered Agent: | | | |
| New Registered Office Address: | | | |
| | Enter Fl | orida street addres | SS |
| _ | | , Florida | <u> </u> |
| | City | | Zip Code |

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member **Type of Action Address** Title ' Name Remove Add Remove Add Remove Remove

| mending any ot | her information, enter change(s) here: (Attach additional sheets, if necessary.) |
|---------------------------------------|--|
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| | |
| | Signature of a member or authorized representative of a member |
| · · · · · · · · · · · · · · · · · · · | Typed or printed name of signee |
| | Typed or printed name of signee |

Page 3 of 3

Filing Fee: \$25.00